NUCLEAR PLANT TO WARNING POINT MESSAGE FORMAT

I. PURPOSE

The purpose of this Annex is to show the message format that is to be used by nuclear plants to transmit initial and follow-up warning messages to warning points.

II. EXECUTION

A. Blank copies of this format will be positioned in the nuclear plant control room, at all warning points, and with appropriate individuals on the warning points' notification list.

B. Since the information that can be transmitted by this format is minimal, it may be necessary to add additional comments. It is not the intent of this format to limit the amount of information provided by the nuclear plant.

C. Once communication is established between the nuclear plant and points other than the warning points (e.g., key individuals, EOCs, and SERT - see PART 1, Figure 2), the format may be modified by the government agency concerned to meet the needs of the developing situation. If necessary, the form may even be replaced by another message format by the government agency concerned. In any case, all messages will be assigned a message number. Messages not transmitted to warning points must be addressed to an individual, a specific EOC, or SERT.

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EMERGENCY NOTIFICATION

1. [A] THIS IS A DRILL [B] ACTUAL EMERGENCY [ ] INITIAL [ ] FOLLOW-UP MESSAGE NUMBER_____

2. SITE:_____ UNIT:_____ REPORTED BY:_____

3. TRANSMITTAL TIME/DATE:_____ (Eastern) _____/_____/_____ MM DD YY CONFIRMATION PHONE NUMBER:_____

4. AUTHENTICATION (If Required):_____ (Number) _____ (Codeword)

5. **EMERGENCY CLASSIFICATION:**

[A] NOTIFICATION OF UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

6. [A] Emergency Declaration At: [B] Termination At: TIME/DATE:_____ (Eastern) _____/_____/_____ MM DD YY (If B, go to item 16.)

7. EMERGENCY DESCRIPTION/REMARKS:_____
_____
_____

8. PLANT CONDITION [A] IMPROVING [B] STABLE [C] DEGRADING

9. REACTOR STATUS: [A] SHUTDOWN: TIME/DATE:_____ (Eastern) _____/_____/_____ MM DD YY [B] _____% POWER

10. EMERGENCY RELEASE(S):
[A] NONE (Go to item 14.) [B] POTENTIAL (Go to item 14.) [C] IS OCCURRING [D] HAS OCCURRED

**11. TYPE OF RELEASE: [ ] ELEVATED [ ] GROUND LEVEL

[A] AIRBORNE: Started:_____ Time (Eastern) _____/_____/_____ MM DD YY Stopped:_____ Time (Eastern) _____/_____/_____ MM DD YY

[B] LIQUID: Started:_____ Time (Eastern) _____/_____/_____ MM DD YY Stopped:_____ Time (Eastern) _____/_____/_____ MM DD YY

**12. RELEASE MAGNITUDE [ ] CURIES PER SEC [ ] CURIES NORMAL OPERATING LIMITS [ ] BELOW [ ] ABOVE

[A] NOBLE GASES_____ [B] IODINES_____

[C] PARTICULATES_____ [D] OTHER_____

**13. ESTIMATE OF PROJECTED OFFSITE DOSE: [ ] NEW [ ] UNCHANGED PROJECTION TIME:_____ (EASTERN)

	TEDE mrem	Thyroid CDE mrem
SITE BOUNDARY	_____	_____
2 MILES	_____	_____
5 MILES	_____	_____
10 MILES	_____	_____

ESTIMATED DURATION:_____HRS.

**14. METEOROLOGICAL DATA: [A] WIND DIRECTION (from)_____? [B] SPEED (MPH)_____

[C] STABILITY CLASS _____ [D] PRECIPITATION (type) _____

15. RECOMMENDED PROTECTIVE ACTIONS

[A] NO RECOMMENDED PROTECTIVE ACTIONS

[B] EVACUATE_____

[C] SHELTER IN-PLACE_____

[D] OTHER_____

16. APPROVED BY:_____ (Name) Emergency Coordinator (Title) TIME/DATE:_____ (Eastern) _____/_____/_____ MM DD YY

?? If items 8-14 have not changed, only items 1-7 and 15-16 are required to be completed. ** Information may not be available on Initial Notifications.

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